

*“Developing Realistic Strategies and Viable Options to Provide  
Comprehensive and Affordable Health Insurance Coverage for All Michigan Citizens”*

<b>Models Development Workgroup Data Request Form</b>				
<b><u>Request Date:</u></b>	<b><u>Requesting Workgroup:</u></b>	<b><u>Name of Contact:</u></b>	<b><u>Contact's Telephone Number:</u></b>	<b><u>Contact's Email Address:</u></b>
9/22/05	Pooling/Insurance Reform	Tyffany Shadd-Coleman	248 448-5045	tshadd@bcbs.com
<b>Request Title (Short Title)</b>	Costs and Benefits for State Health Insurance Policies			
<b>Data Request Description</b>	(1) Costs for state health insurance policies (PPO and HMO) - Individual - 2 person - Family Please include information on co-pas and deductibles (2) Benefits under state health insurance policy (PPO and HMO)			
<b>Why is the Data Needed?</b>				
<b>How will the Data be Used?</b>				
<b>How will Use of this Data Further SPG Project Goals?</b>				
<b>When is the Data Needed?</b>				
<b>What Potential Sources for this Data has Your Group Identified?</b>				
-----For MDCH Processing Only-----				
<b><u>Date Received</u></b>	<b><u>Log Number Assigned</u></b>	<b><u>Date Receipt Acknowledged</u></b>	<b><u>Date Sent for Data Request Review</u></b>	<b><u>Original Reviewers</u></b>
9/22/05	9/22/05-1	9/22/05		